

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

Dennis A. Arakaki

(b) Committee Name: Friends of Dennis Arakaki

(c) Mailing Address: 3046 Uaawa Place
Honolulu, Hawaii 96819

(d) Phone (Bus) 841-7022 (Res) 841-4191
Treasurer's

SECTION II-TYPE OF REPORT

(See the Schedule of Reporting Dates to complete this section)

- ☐ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third
☐ 2nd Preliminary Primary ☐ Short Form ¹ ☐ Second ☐ Fourth
☐ Final Primary
☒ Preliminary General
☐ Final Election Period
☐ Supplemental

REPORTING PERIOD

9-19-04 through 10-18-04

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE
1. Cash on Hand at the Beginning of the Election Period ²		4,076.00
2. Cash on Hand at the Beginning of this Reporting Period.....	11,187.46	
3. Total Receipts (From Line 15).....	3,325.00	42,980
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	14,512.46	47,056
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	4,527.44	41,178.46
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	9,985.02	5,877.54
7. Total Loans at the Closing of this Reporting Period.....	1,060	
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	0	
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	1,060	
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	8,925.02	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate Signature: Allen G. Arakaki Date: 10-22-04 Treasurer Signature: John M. Higgins Date: 10-22-04

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.
² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(ii) Monetary and Non-Monetary Contributions of \$100 or Less.....	175	30,330	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	3,150	12,650	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	3,325	42,980	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(ii) Monetary and Non-Monetary Contributions of \$100 or Less.....	-	-	11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	-	-	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	-	-	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	3,325	42,980	12
13. Public Funds and Other Receipts.....	-	-	13
14. Loans.....	-	-	14
15. Total Receipts (Add Lines 12 through 14).....	3,325.00	42,980.00	15
DISBURSEMENTS			
16. Expenditures.....	3,527.44	38,278.46	16
17. Loans Repaid or Forgiven.....	1,000.00	2,900.00	17
18. Unpaid Expenditures Paid or Forgiven.....	0	0	18
19. Subtotal Disbursements (Add Lines 16 through 18).....	4,527.44	41,178.46	19
20. Unpaid Expenditures.....	0		20
21. Total Disbursements (Add Lines 19 and 20).....	4,527.44	41,178.46	21

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

- ☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES
- ☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

Friends of Dennis Arakaki

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
10/12	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Assoc. of Realtors 1136 - 12th Ave. Hon., HI 96816	Real Estate Service	800	1,800
10/12	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Optometric Political Action Committee 94-239 Waipahu, Depot St. Waipahu	Optometric Services	2,000	
10/12	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Outrigger Hotel P.O. Box 88298 Hon. HI 96830	Hotel Services	200	400
10/12	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Synapse Leg. Service 635 Ainapo St. Hon. HI 96825	Health Services	150	
10/12	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Various Donors		175	
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

3,325

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(iii)).....

3,325

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

Friends of Dennis Arakaki

PAGE 1 OF 4

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9-21-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Waiana'e Community Outreach P.O. Box 1912 Waianae, HI 96792	Donation for Fundraiser	50.00
9-21-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Oceanic Time Warner Cable P.O. Box 30050 Honolulu, HI 96820	Monthly ISP fee for Campaign PC	44.95
9-22-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Longs Kamehameha Shopping Center	Thank You cards for volunteers and Photo File Keepers	26.41
9-24-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Voter Contact Service	Labels for district Mailing	129.13
9-24-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION COSTCO Iwilei	Frames for Certificates Video Tape, snacks for coffee hour	149.78
9-24-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Office Depot 1505 Dillingham Blvd. Honolulu, HI 96817	Cable for campaign P.C. - Wireless	16.50
9-28-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION ZIPPY'S North King Street Honolulu, HI 96819	ZIP Pac for Campaign workers	96.25
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			512.02
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 4

Friends of Dennis Arakaki

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
9-28-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION PACIFIC T-SHIRT CO. 944 Akepo Ln. Hon. HI 96817	Purchase T-shirts screening costs for campaing T-shirts	442.71
10-1-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION JCCY (Jesus Christ is Calling You)	Fundraiser Donation	100.00
10-2-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Jack in the Box North King Street	Lunch for Volunteers	20.33
10-2-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION UFCH (United Fil. Council Hawaii)	Installation Banquet	35.00
10-6-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Longs Kamehameha Shopping Center	Gifts for visiting dignitaries - Philipppines	55.71
10-7-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION MY PRINTERS	Mailing Service and Postage Dist Mail Out	985.52
10-7-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Filipino Women's Civic Club	Donation-Maria Clara Ball	35.00
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			1,674.27
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 3 OF 4

Friends of Dennis Arakaki

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10-11-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Honolulu Star Bulletin 500 Ala Moana Blvd. Hon. HI 96813	Donation - Newspaper in Education	25.00
10-11-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION FHS '65 Alumni Club 94-416 Ukee St. Waipahu, HI 96796	Donation for 40th Anniversary	100.00
10-14-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Hochi Ltd. 917 Kokea St. Hon. HI 96817	Asian-American AD Special	374.98
10-16-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Office Depot 1505 Dillingham Blvd. Hon., HI 96817	Replacement Cable and Pens	14.97
10-16-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Foodland Dillingham Hon., HI 96819	5-10 Gift Certificate Donation - Kalihi Tennis Tournament	50.00
10-18-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION KNDI 1734 South King Street Honolulu, HI 96826	30 Sec. Ad Spots	256.20
10-18-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION KNDI 1734 S. King Street Honolulu, HI 96826	60 Sec. Ad Spots	442.00
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			1,263.15
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 4 OF 4

Friends of Dennis Arakaki

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10-18-04	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Voter Contact	Labels for Registered Voters FIL Names	78.00
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			78.00
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			3,527.44

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**


**SCHEDULE C
PUBLIC FUNDS AND OTHER RECEIPTS
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

Friends of Dennis Arakaki

DATE OF DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF SOURCE OF PUBLIC FUNDS OR OTHER RECEIPT	DESCRIPTION OF OTHER RECEIPT	AMOUNT OF PUBLIC FUNDS OR OTHER RECEIPT THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
1. SUBTOTAL OF PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (This Page).....			0	
2. TOTAL PUBLIC FUNDS AND OTHER RECEIPTS THIS PERIOD (Last Page Only) (Transfer total to Line Number 13 of the Disclosure Report).....			0	

ATTACH A COPY OF THE
EXECUTED LOAN DOCUMENT AT
THE TIME OF INITIAL DISCLOSURE

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE D
LOANS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

Friends of Dennis Arakaki

PAGE 1 OF 1

LOAN SOURCE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIPCODE OF LENDER NAME OF EMPLOYER AND OCCUPATION	AMOUNT OF LOAN AT BEGINNING OF THIS PERIOD	NEW LOAN AMOUNT THIS PERIOD	AMOUNT REPAID OR FORGIVEN THIS PERIOD	AMOUNT OF LOAN AT CLOSING OF THIS PERIOD
DATE OF LOAN	PURPOSE OF LOAN				
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER	Personal			<input type="checkbox"/> FORGIVEN 1,000.00	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	
<input type="checkbox"/> CANDIDATE <input type="checkbox"/> IMMEDIATE FAMILY <input type="checkbox"/> FINANCIAL INSTITUTION <input type="checkbox"/> OTHER				<input type="checkbox"/> FORGIVEN	

1. SUBTOTAL (This Page).....	0		
2. TOTAL NEW LOANS THIS PERIOD (Last Page Only) (Transfer total to Line Number 14 of the Disclosure Report).....	0		
3. TOTAL LOANS REPAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 17 of the Disclosure Report).....		1,000	
4. TOTAL LOANS AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 7 of the Disclosure Report)....			0

Form CC-5(D) (Rev. 5/99)

If a loan is forgiven, the loan must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven loan does not have to be reported as an "Expenditure" on Schedule B.

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE E UNPAID EXPENDITURES CANDIDATE COMMITTEE

NOTE: EXPENDITURES ARE CONSIDERED MADE WHEN THE PRODUCT IS DELIVERED OR THE SERVICE IS RENDERED (ACCRUAL METHOD OF ACCOUNTING).

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 1

Friends Of Dennis Arakaki

DATE OF UNPAID EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR	AMOUNT OF UNPAID EXPENDITURE AT BEGINNING OF THIS PERIOD	NEW UNPAID EXPENDITURE AMOUNT THIS PERIOD	AMOUNT PAID OR FORGIVEN THIS PERIOD	AMOUNT OF UNPAID EXPENDITURE AT CLOSING OF THIS PERIOD
	PURPOSE OF UNPAID EXPENDITURE				
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	
				<input type="checkbox"/> FORGIVEN	

1. SUBTOTAL (This Page).....			
2. TOTAL NEW UNPAID EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 20 of the Disclosure Report).....			
3. TOTAL UNPAID EXPENDITURES PAID OR FORGIVEN THIS PERIOD (Last Page Only) (Transfer total to Line Number 18 of the Disclosure Report).....	0		
4. TOTAL UNPAID EXPENDITURES AT THE CLOSING OF THIS PERIOD (Last Page Only) (Transfer total to Line Number 8 of the Disclosure Report).....	0		

Form CC-5(E) (Rev. 5/99)

If an unpaid expenditure is forgiven, the unpaid expenditure must also be reported as a "Non-Monetary Contribution" on Schedule A. The forgiven unpaid expenditure does not have to be reported as an "Expenditure" on Schedule B.